

UTILITY PATENT APPLICATION TRANSMITTAL

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

Attorney Docket No.

ARRAY 2**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**Transmitted herewith is the patent application of () application identifier or (X) first named inventor, Vincente Rosa, entitled TIRE DISPLAY APPARATUS, for a(n):

(X) Original Patent Application.

() Continuing Application (prior application not abandoned):

() Continuation () Divisional () Continuation-in-part (CIP)
of prior Application No. _____, filed on _____.

() A statement claiming priority under 35 USC § 120 has been added to the specification.

Enclosed are:

(X) Specification; 12 Total Pages. (X) Drawing(s); 3 Total Sheets.

(X) Oath or Declaration:

(X) A Newly Executed Combined Declaration and Power of Attorney:

() Signed. (X) Unsigned. () Partially Signed.

() A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).

() Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated herein by reference.

() Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).

() Power of Attorney.

(X) Return Receipt Postcard.

() Associate Power of Attorney.

(X) A Check in the amount of \$750.00 for the Filing Fee.

() Preliminary Amendment.

() Information Disclosure Statement and Form PTO-1449.

() A Certified Copy of Priority Documents (if foreign priority is claimed).

() Applicant claims small entity status.

() Other: _____.

CLAIMS AS FILED

FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	12	0	\$18.00	\$0.00
Independent Claims	2	0	\$84.00	\$0.00
Multiple Dependent Claim Fee (if applicable)				\$0.00
Assignment Recording Fee (if applicable)				\$0.00
Basic Filing Fee				\$750.00
Total Filing Fee				\$750.00

Please charge \$ _____ to Deposit Account No. 50-2127 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, the Commissioner is hereby authorized to charge any fees required or credit any overpayment to this Deposit Account. A duplicate copy of this sheet is enclosed for fee processing against this Deposit Account.

Respectfully submitted,

By: John H. Thomas

John H. Thomas, Attorney of Record, Reg. No. 33460

Date: August 20, 2003

Correspondence Address:

John H. Thomas, P.C.
1561 East Main Street
Richmond, Virginia 23219
Phone: 804 344 8130
Fax: 804 644 3643

I hereby certify that this is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to:

Assistant Commissioner for Patents
Box Patent Application
Washington, D.C. 20231By: John H. Thomas

Typed Name: John H. Thomas

Express Mail Label No.: EU172738102US

Date of Deposit: August 20, 2003

22389 U.S. PTO
10/644146
08/20/03

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="margin: 0; font-size: small;">Effective 01/01/2003. Patent fees are subject to annual revision.</p>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td></td></tr> <tr><td>Filing Date</td><td>August 20, 2003</td></tr> <tr><td>First Named Inventor</td><td>Vincente Rosa</td></tr> <tr><td>Examiner Name</td><td>Unassigned</td></tr> <tr><td>Art Unit</td><td>Unassigned</td></tr> <tr><td>Attorney Docket No.</td><td>ARRAY 2</td></tr> </table>		Application Number		Filing Date	August 20, 2003	First Named Inventor	Vincente Rosa	Examiner Name	Unassigned	Art Unit	Unassigned	Attorney Docket No.	ARRAY 2
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT (\$) 750.00															

<p>METHOD OF PAYMENT (check all that apply)</p> <p> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p> <input type="checkbox"/> Deposit Account </p> <p> Deposit Account Number: 50-2127 Deposit Account Name: John H. Thomas, P.C. </p> <p>The Commissioner is authorized to: (check all that apply)</p> <p> <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments </p> <p> <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application </p> <p> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </p> <p style="text-align: center;">FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td>750.00</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td></td> <td>(\$ 750.00)</td> </tr> </tbody> </table> <p>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</p> <p> Total Claims: 10 -20**= 0 X 0 = 0 Independent Claims: 2 -3**= 0 X 0 = 0 Multiple Dependent: 0 = 0 </p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>**Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td></td> <td>(\$)</td> </tr> </tbody> </table> <p style="font-size: x-small;">**or number previously paid, if greater; For Reissues, see above</p>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	750	2001	375	Utility filing fee	750.00	1002	330	2002	165	Design filing fee		1003	520	2003	260	Plant filing fee		1004	750	2004	375	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					(\$ 750.00)	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	84	2201	42	Independent claims in excess of 3		1203	280	2203	140	Multiple dependent claim, if not paid		1204	84	2204	42	**Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$)	<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	John H. Thomas	Registration No. (Attorney/Agent)	33460
Signature		Telephone	804 344 8130
		Date	August 20, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization of PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.